

**DECLARATION FOR UTILITY OR DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☒ Declaration  
Submitted with  
Initial Filing      OR      ☐ Declaration  
Submitted after Initial  
Filing (surcharge (37  
CFR 1.16(c)) required)

Attorney Docket Number

CONN-001

First Named Inventor

Conrad, et al.

**COMPLETE IF KNOWN**

Application Number

N/A

Filing Date

Herewith

Group Art Unit

N/A

Examiner Name

N/A

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**USE OF RELAXIN TO TREAT DISEASES RELATED TO VASOCONSTRICTION**

the specification of which:

☒ is attached hereto

OR

☐ was filed on \_\_\_\_\_ as United States Application Number or PCT International Application Number \_\_\_\_\_ and was amended on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined by 37 CFR 1.56.

Insofar as the subject matter of each of the claims of this application are not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designating at least one country other than the United States of America, listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) having a filing date before that of the application(s) of which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)
60/181,408	02/09/2000
60/200,284	04/28/2000
60/242,216	10/20/2000

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application(s) designating the United States of America, listed below.

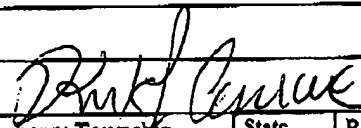
U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

## DIRECT ALL CORRESPONDENCE TO:

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City, State, Zip	Menlo Park, CA 94025				
Country	U.S.A.	Telephone	650-327-3400	Facsimile	650-327-3231

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

## Name of Sole or First Inventor:

Given Name (first and middle [if any])				Family Name or Surname			
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Inventor's Signature						Date	2/8/01
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## Name of Second Inventor:

Given Name (first and middle [if any])				Family Name or Surname			
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Inventor's Signature						Date	
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Post Office Address	619 Bay Road						
City	Menlo Park	State	CA	Zip	94025	Country	USA

09780752-020901

## Name of Third Inventor:

Given Name (first and middle [if any])				Family Name or Surname			
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Inventor's Signature						Date	
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City	Oakland	State	CA	Zip	94610	Country	USA

## Name of Fourth Inventor:

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Inventor's Signature						Date	
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## Name of Fifth Inventor:

Given Name (first and middle [if any])				Family Name or Surname			
Carol A.				Tozzi			
Inventor's Signature	<i>Carol A. Tozzi</i>					Date	2/8/01
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Post Office Address	13 Hemlock Hill Road						
City	Jackson	State	NJ	Zip	08527	Country	USA

T06020-2508250

**DECLARATION FOR QUALITY OR DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

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U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

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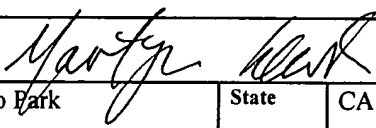
<b>Name</b>	Paula A. Borden				
<b>Address</b>	BOZICEVIC, FIELD & FRANCIS LLP				
<b>Address</b>	200 Middlefield Road, Suite 200				
<b>City, State, Zip</b>	Menlo Park, CA 94025				
<b>Country</b>	U.S.A.	<b>Telephone</b>	650-327-3400	<b>Facsimile</b>	650-327-3231

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**Name of Sole or First Inventor:**

Given Name (first and middle [if any])				Family Name or Surname			
Kirk P.				Conrad			
<b>Inventor's Signature</b>						<b>Date</b>	
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<b>City</b>	Cranberry Township	<b>State</b>	PA	<b>Zip</b>	16066	<b>Country</b>	USA

**Name of Second Inventor:**

Given Name (first and middle [if any])				Family Name or Surname			
Martyn				Lewis			
<b>Inventor's Signature</b>						<b>Date</b>	2/7/01
<b>Residence: City</b>	Menlo Park	<b>State</b>	CA	<b>Country</b>	USA	<b>Citizenship</b>	UK
<b>Post Office Address</b>	619 Bay Road						
<b>City</b>	Menlo Park	<b>State</b>	CA	<b>Zip</b>	94025	<b>Country</b>	USA

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Name of Third Inventor:							
Given Name (first and middle [if any])				Family Name or Surname			
Elaine M. N. <i>as 2/2/07</i>				Unemori			
Inventor's Signature	<i>Elaine M. Unemori</i>					Date	<i>2/2/07</i>
Residence: City	Oakland	State	CA	Country	USA	Citizenship	US
Post Office Address	1059 Ardmore Avenue						
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Name of Fourth Inventor:							
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Xinfan				Huang			
Inventor's Signature	<i>[Signature]</i>					Date	<i>2/2/07</i>
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